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APPLICANTS

Vincent Pongpairachana, La Conversion, SWITZERLAND;
 Timothy John MacLean, Bath and South East Somerset, UNITED KINGDOM;
 Robert Prasser, Althofen, AUSTRIA;
 Gerhard Lauchard, Silbereg, AUSTRIA;
 Werner Wurmbauer, Klagenfurt, AUSTRIA;
 Gerhard Kogler, Althofen, AUSTRIA;

**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *******

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SWITZERLAND	SHEETS DRAWING 21	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

46188

TITLE

HAND-HELD ELECTRONICALLY CONTROLLED INJECTION DEVICE FOR INJECTING LIQUID MEDICATIONS

FILING FEE RECEIVED 1930	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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